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| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS | Application Number | 10/701,883 |
| | Filing Date | November 5, 2003 |
| | First Named Inventor | Muhanna, Nabil L. |
| | Art Unit | |
| | Examiner Name | |
| | Attorney Docket Number | 49272.830034.US2 |

I hereby revoke all previous powers of attorney given in the above-identified application.

A Power of Attorney is submitted herewith.

OR

70818

I hereby appoint the practitioners associated with the Customer Number:

Please change the correspondence address for the above-identified application to:

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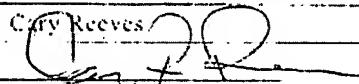
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I am the:

Applicant/Inventor
 Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73 (b) enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

| | | | |
|-----------|---|-----------|--------------|
| Name | Cary Reeves | | |
| Signature |  | | |
| Date | 10-23-07 | Telephone | 303-443-7500 |

NOTE: Signatures of all co-inventors or assignees of record of the entire interest of their representative(s) are required. Submit multiple forms if more than one signature is required. See below.

| |
|---|
| <input checked="" type="checkbox"/> Total of 1 forms are submitted. |
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